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005/PTO U.S. Department of Commerce Patent and Trademark Office		Attorney Docket Number 005-905-300
First Named Inventor Oliver et al.		
<b>DECLARATION</b>		
<input type="checkbox"/> Declaration Submitted with Initial Filing	or <input checked="" type="checkbox"/> Declaration Submitted After Initial Filing	<b>COMPLETE IF KNOWN</b>
Application Number 09/036,236		
Filing Date March 6, 1998		
Group Art Unit		
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SYSTEM FOR MANAGEMENT OF TRANSACTIONS ON NETWORKS**

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

03/06/1998

as United States Application Number or PCT International

Application Number

09/036,236

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed			Certified copy attached?			
						YES		NO	

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

APPLICATION NUMBER(S)	FILING DATE (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
60/040,223	03/07/1997	

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09/036,236/36945

Designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International Application Numbers are listed on a supplemental priority sheet attached hereto.

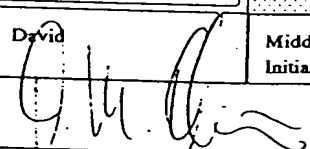
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Firm Name	BLODGETT & BLODGETT, P.C.		Customer Number (if applicable)	20433
Name	Registration Number	Name	Registration Number	
Gerry A. Blodgett	26,090	Wilfred F. DesRosiers	25,531	
Thomas C. Blodgett	30,933			

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

<input checked="" type="checkbox"/>	Please direct all correspondence to:	Name	Gerry A. Blodgett		
Address		BLODGETT & BLODGETT, P.C.		CUSTOMER NUMBER 20433	
Address 43 Highland Street					
City	Worcester	State	Massachusetts	Zip	01609-2797
Country	U.S.A.	Telephone	(508) 753-5533	Fax	(508) 755-1837

I hereby declare that all statements made herein on my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.

Name of Sole or First Inventor:						A petition has been filed for this unsigned inventor	
Given Name	David	Middle Initial	M.	Family Name	Oliver	Suffix	
Inventor's Signature					Date	June 12, 1998	
RESIDENCE: City	Owego	State	NY	Country	U.S.A.	Citizenship	U.S.A.
POST OFFICE ADDRESS 387 FRONT STREET							
City	Owego	State	NY	Zip	13827	Country	U.S.A.
						Applicant Authority	
<input checked="" type="checkbox"/>	Additional Inventors are being named on supplemental sheet(s) attached hereto.						

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Type a plus sign (+) inside this box [ + ]

Supplemental Sheet

NAME OF ADDITIONAL JOINT INVENTOR, IF ANY										A petition has been filed for this unsigned inventor											
Given Name	William				Middle Initial	P.	Family Name	Deansmore				Suffix	Jr.								
Inventor's Signature											Date										
RESIDENCE: City		Williamstown				State		MA		Country		US		Citizenship		US					
POST OFFICE ADDRESS		1182 Main Street																			
City	Williamstown				State		MA		Zip	01267		Country	US		Applicant Authority						
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY										A petition has been filed for this unsigned inventor											
Given Name	Michael				Middle Initial	J.	Family Name	Callahan				Suffix									
Inventor's Signature											Date										
RESIDENCE: City		Berkeley				State		CA		Country		US		Citizenship		US					
POST OFFICE ADDRESS		2522 Warring Street, #2																			
City	Berkeley				State		CA		Zip	94704		Country	US		Applicant Authority						
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY										A petition has been filed for this unsigned inventor											
Given Name					Middle Initial		Family Name					Suffix									
Inventor's Signature											Date										
RESIDENCE: City						State				Country				Citizenship							
POST OFFICE ADDRESS																					
City					State				Zip			Country			Applicant Authority						
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY										A petition has been filed for this unsigned inventor											
Given Name					Middle Initial		Family Name					Suffix									
Inventor's Signature											Date										
RESIDENCE: City						State				Country				Citizenship							
POST OFFICE ADDRESS																					
City					State				Zip			Country			Applicant Authority						
Additional inventors are being named on supplemental sheet(s) attached hereto.																					

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Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office

## DECLARATION

☐ Declaration or ☒ Declaration  
Submitted with Submitted After  
Initial Filing Initial Filing

First Named Inventor Oliver et al.

## COMPLETE IF KNOWN

Application Number 09/036,236  
Filing Date March 6, 1998  
Group Art Unit  
Examiner Name

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(Title of the invention)

the specification of which

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified copy attached?			
				YES	NO		

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60/040,223	03/07/1997	

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## DECLARATION

Page 2

Designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code § 112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

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Name	Registration Number	Name	Registration Number	
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Thomas C. Blodgett	30,933			

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<input checked="" type="checkbox"/>	Please direct all correspondence to:	Name	Gerry A. Blodgett		
Address		BLODGETT & BLODGETT, P.C.			
Address		43 Highland Street			
City	Worcester	State	Massachusetts	Zip	01609-2797
County	U.S.A.	Telephone	(508) 753-5533	Fax	(508) 755-1837

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Name of Sole or First Inventor:						A petition has been filed for this unsigned inventor	
Given Name	David	Middle Initial	M.	Family Name	Oliver	Suffix	
Inventor's Signature					Date		
RESIDENCE: City		State		Country		Citizenship	
POST OFFICE ADDRESS							
City		State		Zip		Country	
						Applicant Authority	
<input checked="" type="checkbox"/>	Additional Inventors are being named on supplemental sheet(s) attached hereto.						

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BLODGETT

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## DECLARATION

Declaration

or

☒

Declaration

Submitted with

Submitted After

Initial Filing

Initial Filing

First Named Inventor

Oliver et al.

## COMPLETE IF KNOWN

Application Number

09/036,236

Filing Date

March 6, 1998

Group Art Unit

Examiner Name

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					YES	NO

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APPLICATION NUMBER(S)	FILING DATE (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
60/040,223	03/07/1997	

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NO. 8229230536945

## DECLARATION

Page

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Name	Registration Number	Name	Registration Number
Gerry A. Blodgett	26,090	Walter F. DesRosiers	25,531
Thomas C. Blodgett	30,933		

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

☒ Please direct all correspondence to: Name Gerry A. Blodgett

Address BLODGETT & BLODGETT, P.C. CUSTOMER NUMBER 20433

Address 43 Highland Street

City Worcester State Massachusetts Zip 01609-2797

Country U.S.A. Telephone (508) 753-5533 Fax (508) 755-1837

I hereby declare that all statements made herein on my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unnamed inventor

Given Name	David	Middle Initial	M.	Family Name	Oliver	Suffix	
------------	-------	----------------	----	-------------	--------	--------	--

Inventor's Signature		Date	
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RESIDENCE: City		State		Country		Citizenship	
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POST OFFICE ADDRESS

City		State		Zip		Country		Applicant Authority	
------	--	-------	--	-----	--	---------	--	---------------------	--

☒ Additional inventors are being named on supplemental sheet(s) attached hereto.



## DECLARATION

ADDITIONAL INVENTOR  
Supplemental Sheet

NAME OF ADDITIONAL JOINT INVENTOR, IF ANY				A petition has been filed for this unassigned inventor			
Given Name	William	Middle Initial		Family Name	Denamore	Suffix	Jr.
Inventor's Signature					Date		
RESIDENCE: City	Williamstown	State	MA	Country	US	Citizenship	US
POST OFFICE ADDRESS		1182 Main Street					
City	Williamstown	State	MA	Zip	01267	Country	US
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY		A petition has been filed for this unassigned inventor					
Given Name	Michael	Middle Initial	I.	Family Name	Collins	Suffix	
Inventor's Signature	William Collins				Date	17 July 98	
RESIDENCE: City	Berkley	State	CA	Country	US	Citizenship	US
POST OFFICE ADDRESS		2522 Worthing Street, 02					
City	Berkley	State	CA	Zip	94704	Country	US
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY		A petition has been filed for this unassigned inventor					
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
RESIDENCE: City		State		Country		Citizenship	
POST OFFICE ADDRESS							
City		State		Zip		Country	
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY		A petition has been filed for this unassigned inventor					
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
RESIDENCE: City		State		Country		Citizenship	
POST OFFICE ADDRESS							
City		State		Zip		Country	
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY		A petition has been filed for this unassigned inventor					
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
RESIDENCE: City		State		Country		Citizenship	
POST OFFICE ADDRESS							
City		State		Zip		Country	
Additional inventors are being named on supplemental sheet(s) attached hereto.							

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